03/23/2009 15:30

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FEC FORM 1

STATEMENT OF ORGANIZATION

FORM	1	ORGANIZATION										
. •	-	(See instructions)					Office use only					
1. NAME OF COMMITTE	E (in full)	(Chec is cha	k if name nged)	Exan over	nple: If typying the lines	, type	12FE4	IM5				
PFIZER IN	IC. PAC										ш	
						шш					لــــا	
ADDRESS (number	er and street)	235 EAST	42ND STRE	ET		ш					шШ	
(Check if action is changed		NEW YOR	<u> </u>	1 1			NY		10017	<mark> </mark>		
				CITY			STATE	. –	ZIP	CODE 4		
COMMITTEE'S E	E-MAIL ADDF	ESS (Please provid	le only one e-m	ail addre	ess)							
(Check if a		patricia.m	.mccahey@	pfizer.	com						لـــــا	
is changed	,			1.1		111	1 1 1	1 1 1	111	1.1	لبي	
(Check if ac is changed)	D 2 D / Y Y 2 0) y y	1 1			111	1 1 1		1 1		
3. FEC IDENTIFICATION NUMBER C C00016683												
4. IS THIS STA	ATEMENT	NEW (N)	OR	Х	AMEND	ED (A)						
I certify that I have	examined this	Statement and to the I	oest of my know	ledge an	d belief it is true	e, correct and	d complete					
Type or Print Nar	me of Treasure	er Richa	rd L. Hoddes	son								
Signature of Trea	surer El <u>ec</u>	tronically Filed by	Richard L.	Hodde	son		Date	0 3	23	/ Y	2 0 0 9	
NOTE: Submission	n of false, erron	eous, or incomplete in							of 2 U.S.C	. S437g.		
Office Use Only					For further in Federal Election Toll Free 800- Local 202-694	on Commiss 424-9530			FEC F	ORM d 02/2009		